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<b>TRANSMITTAL FORM</b> <small>DEC 9 1 2005</small> <small>PATENT AND TRADEMARK OFFICE</small> <small>(Use this form for all correspondence after initial filing)</small>		Application Number	10/084,881
		Filing Date	February 27, 2002
		First Named Inventor	Nina LEWIS, et al.
		Art Unit	2141
		Examiner Name	Chirag R. Patel
Total Number of Pages in This Submission		Attorney Docket Number	255/220; OI7010852004

**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Supplemental Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Return Receipt Postcard; 2. Form PTO/SB/08a (1 pg.); 3. 1 cited reference.
<b>Remarks</b>		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm	Bingham McCutchen LLP		
Signature			
Printed Name	Gerald Chan		
Date	December 19, 2005	Reg. No.	51,541

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature			
Typed or printed name	Tina M. Ingrande	Date	December 19, 2005

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 <b>FEE TRANSMITTAL</b> <b>for FY 2005</b>		<b>Complete If Known</b>	
<small>Effective on 12/08/2004. See pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</small>		Application Number	10/084,881
<small>DEC 21 2005</small>		Filing Date	February 27, 2002
		First Named Inventor	Nina LEWIS, et al.
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Examiner Name	Chirag R. Patel
<b>TOTAL AMOUNT OF PAYMENT</b> (\$)		Art Unit	2141
		Attorney Docket No.	255/220; OI7010852004

**METHOD OF PAYMENT** (check all that apply)

- Check  Credit Card  Money Order  None  Other (please identify) : \_\_\_\_\_
- Deposit Account Deposit Account Number: 50-2518 Deposit Account Name: Bingham McCutchen LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee
- Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments

Under 37 CFR 1.16 and 1.17

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Fee (\$)</u>	<u>Fee(\$)</u>	<u>Fee(\$)</u>	<u>Fee(\$)</u>	<u>Fee(\$)</u>	<u>Fee(\$)</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 30 (including Reissues)

Multiple dependent claims

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee(\$)</u>	<u>Fee Paid (\$)</u>	<u>Small Entity</u>	
				<u>Fee (\$)</u>	<u>Fee (\$)</u>
50 - 50 or HP = 0	x 0 =			50	25

HP = highest number of total claims paid for, if greater than 20.

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee(\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	
				<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
3 - 3 or HP = 0	x 0 =			200	100

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
— - 100 = —	/ 50 = —	(round up to a whole number) x	=	

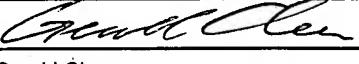
**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge) : Information Disclosure Statement FEE, 37 CFR 1.17(p)

180

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	51,541	Telephone	(650) 849-4960
Name (Print/Type)	Gerald Chan			Date	December 19, 2005

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